

General Assembly

January Session, 2001

Raised Bill No. 1288

LCO No. 4048

Referred to Committee on Insurance and Real Estate

Introduced by: (INS)

AN ACT CONCERNING COOPERATIVE HEALTH CARE ARRANGEMENTS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 (NEW) (a) As used in this section:
- 2 (1) "Cooperative arrangement" means an agreement among two or
- 3 more health care providers for the purpose of providing health care
- 4 services, which agreement may include, but need not be limited to,
- 5 matters concerning: (A) Fees, prices or rates, (B) sharing, allocation or
- 6 referral of patients, (C) personnel, (D) instructional programs, (E)
- 7 support services and facilities or medical, diagnostic or laboratory
- 8 facilities or procedures, or (F) mergers, acquisitions or joint ventures of
- 9 two or more health care providers, including, but not limited to,
- 10 physician practice groups;
- 11 (2) "Health care provider" means a state licensed or certified person
- 12 or facility that delivers any health care service;
- 13 (3) "Certificate of public advantage" means a certificate issued by the
- 14 Attorney General authorizing health care providers that are parties to

- 15 a cooperative arrangement to engage in conduct that could tend to
- 16 lessen competition in a relevant health care market upon a showing
- 17 that such cooperative arrangement meets the criteria set forth in
- 18 subdivision (2) of subsection (c) of this section; and
- 19 (4) "Attorney General" means the Attorney General of the state of 20 Connecticut.
- 21 (b) The Attorney General may issue a certificate of public advantage 22 in accordance with this section. Any two or more health care providers 23 may apply to the Attorney General for a certificate of public advantage 24 to authorize a cooperative arrangement. The application shall include 25 (1) the names of the applicants, (2) a description of the nature and 26 scope of the cooperative arrangement, (3) a description of any 27 consideration passing to any party under the agreement, and (4) 28 evidence in support of the criteria described in subdivision (2) of 29 subsection (c) of this section. Each application shall be accompanied by 30 ____ dollars. Any information of a proprietary nature 31 submitted in such application that meets the standards set forth in 32 subdivision (5), (8) or (10) of subsection (b) of section 1-210 of the 33 general statutes, shall be deemed confidential and exempt from public 34 disclosure.
 - (c) (1) The Attorney General shall review each application submitted pursuant to subsection (b) of this section and shall issue a written decision approving or denying the application not later than ninety days after receiving the application. The decision shall set forth the Attorney General's findings with regard to the benefits and disadvantages set forth in subdivision (2) of this subsection and a conclusion as to whether the benefits outweigh the disadvantages to the people of this state. The Attorney General may conduct a hearing to obtain information necessary to make such decision.
- 44 (2) In authorizing a cooperative arrangement under this section, the 45 Attorney General may consider the criteria set forth in subsection (a) of 46 section 19a-637 of the general statutes that the Attorney General deems

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relevant to the application for a certificate of public advantage and any benefits of such cooperative arrangement in furthering the goals of health care reform including, but not limited to: (A) Enhancement of the quality of health services to consumers; (B) gains in cost efficiency of health services; (C) improvement in utilization of and access to health services and equipment; and (D) avoidance of duplication of health care resources. The Attorney General shall compare the benefits of the cooperative arrangement to the disadvantages, which disadvantages may include, but are not limited to: (i) The potential reduction of competition; (ii) the adverse impact on quality, access or price of health care services to consumers; and (iii) the availability of arrangements to achieve the same benefits that are less restrictive of competition.

- (3) Cooperative arrangements authorized by the Attorney General in a certificate of public advantage issued pursuant to this section shall be deemed to be conduct taken pursuant to the provisions of the general statutes and in furtherance of the public purposes of this state and shall not be subject to the provisions of chapter 624 of the general statutes, except that the Attorney General may use the powers set forth in section 35-42 of the general statutes. Nothing in this section shall be construed to require any health care provider to obtain a certificate of public advantage in order to enter into a cooperative arrangement, and absent approval of such cooperative arrangement by the Attorney General, the legality of such cooperative arrangement shall be determined by applicable antitrust law.
- (4) Health care providers in a cooperative arrangement authorized by this section shall submit an annual report accompanied by a fee of _____ dollars to the Attorney General.
- (5) The Attorney General shall actively supervise the cooperative arrangements authorized by this section to determine whether the conduct should continue to be authorized. The Attorney General shall review the conduct through annual progress reports submitted by the

health care providers in a cooperative arrangement in accordance with subdivision (4) of this subsection to evaluate whether the conduct is consistent with the application and whether the benefits continue to outweigh the disadvantages. If the Attorney General has reason to believe that the likely benefits no longer outweigh the disadvantages, the Attorney General shall notify the holder of the certificate and hold a hearing to determine whether such certificate should be modified or revoked. Such modification or revocation shall take effect ninety days from the receipt of notice of a final decision by the Attorney General. The Attorney General shall not modify or revoke a certificate of public advantage more than three years after the initial issuance of such certificate.

- (d) Any person denied a certificate of public advantage by the Attorney General pursuant to this section and any holder of a certificate of public advantage that has been modified or revoked by the Attorney General pursuant to subdivision (5) of subsection (c) of this section may appeal therefrom as if such denial, modification or revocation were a contested case within the meaning of chapter 54 of the general statutes.
- (e) No managed care organization, as defined in section 38a-478 of the general statutes, shall refuse to negotiate in good faith with parties to a cooperative arrangement authorized by the Attorney General. Any managed care organization that violates this subsection shall be subject to a civil penalty of not more than twenty-five thousand dollars per day for each violation. The Attorney General may institute proceedings to enforce the provisions of this section in the superior court for the judicial district of Hartford.
- (f) A violation of subsection (e) of this section shall be an unfair or deceptive trade practice in violation of subsection (a) of section 42-110b of the general statutes.

Statement of Purpose:

To allow health care providers to enter into cooperative arrangements concerning fees, prices, rates, patient referrals, instruction, personnel and other matters and to exempt such arrangements from certain state antitrust laws if the Attorney General determines that the benefits of such arrangements outweigh the adverse effect on competition.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]